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**REVOCATION OF POWER OF
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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/603,695
Filing Date	6/26/2003
First Named Inventor	Michael Dobbs
Art Unit	2828
Examiner Name	
Attorney Docket Number	ITDE-PACD106US

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the Practitioners associated with the Customer Number: 23122

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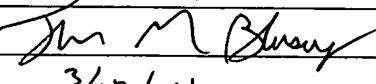
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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Thomas M. Blasey		
Signature			
Date	3/18/04	Telephone	703-790-6314

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

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